## Welcome to The City of North Little Rock Residential Customers

Your Name:	
	Drivers License Number:
Telephone: (home)	(cell)
Employer:	Work Telephone:
Spouse's Name:	
SSN:	Drivers License Number:
Employer:	Work Telephone:
Owner:	Renter:
Landlord Telephone:	
Address Moving To:	
Date Service Desired:	
Address Moving From:	
Date Desired for Service Disconn	ect:
Deposits are required for a senior citizen (over 62 y required), or provides a goo	osit Requirement  all Electric accounts unless customer is a ears old), disabled (proof of disability d letter of credit from the current Electric a 12 month payment history.
Electric Deposit \$100	.00 Inspection (if needed) \$7.50
** Copy of lease agreement or to	proof of ownership and picture ID required ** o establish service.
Signature:	